## **FORM PTO-1083**

ES PATENT AND TRADEMARK OFFICE

In re application of:

Masanori KIMURA

Serial No: 10/030.867 Confirmation No.: 8937 Filed: April 29, 2002

METHOD FOR GROWING SEMICONDUCTOR

SINGLE CRYSTAL

Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

A Request for Continued Examination (RCE) is enclosed.

No additional fee is required.

Art Unit:

Examiner: Matthew A. Anderson

> I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed

to:

Mail Stop RCE

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

October 12, 2004

Date of Deposit

John P. Schenecher, Reg. No. 23,009

Dr. Signatur

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR		(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE	
TOTAL CLAIMS FEE	5	-	20	**	0	LG=\$18 SM=\$9	\$18	\$	0
INDEPENDENT CLAIMS FEE	1	T-	3	***	0	LG=\$86 SM=\$43	\$86	\$	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS  LARGE ENTITY FEE = \$290 SMALL ENTITY FEE = \$145								\$	0
Independent Claims: 4 TOTAL								\$	0

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

A check in the amount of \$\_-0- to cover the additional claims fee is enclosed. A copy of this sheet is enclosed.

A check in the amount of \$430 to cover the extension fee is enclosed. A copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge any deficiencies of fees associated with this  $\boxtimes$ communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.

Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims  $\boxtimes$ 

Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted, HOGAN & HARTSON L.L.P.

Date: October 12, 2004

Biltmore Tower 500 South Grand Avenue, Suite 1900 Los Angeles, California 90071

Telephone: 213 337-6700 Facsimile: 213 337-6701

218329\_1.DOC

John P. Scherlacher Registration No. 23,009 Attorney for Applicant(s)